FORM 04-611SF

ALASKA CORPORATION NET INCOME TAX RETURN SHORT FORM

2001										
DEPARTMENT USE ONLY										

For the calendar year 2001 or the taxable year beginning			
, 2001 and ending,,			

Federal EIN	Alas	ska Corporation File #	NAICS	Code	Alaska Business Licer	ise #
	1					
Name				1	Геlephone Number	
Mailing Address				F	ax Number	
Oit.	Stat		7:n C	Dada - F	- Mail Address	
City	е	Zip C	Jode E	E-Mail Address		
Contact Person)			Contact Telephone Number		
Check applicable boxes:	VEC. NO.	(Charle Van an Na)	RETUI	RN DATA		
☐ Final Alaska return	YES NO	,	tension in effe	ect? If ves. att	ach copy of Form 7004	4.
■ Name or address change since last year		Is this an inforr	mation report f	for an inactive	corporation? (See in:	structions.)
Limited Liability Company (LLC)					ed group? If yes, you r	nay not use
☐ Exempt organization (see instructions)☐ S-Corporation (Attach 1120S)		this short Form 4. Does this corp			ity (taxable nexus) out	side of Alaska?
Homeowners Association (Attach 1120H)					-611SF. You must us	
S	CHEDULE A-	SF - NET INCOME	TAX SUMN	MARY		
						DEPT USE ONLY
L Alaska income (loss) from Schedule B-SF	=		1			
2. Alaska net operating loss deduction (attac	ch schedule)		2		NL	
3. Alaska taxable income. Subtract line 2 from	om line 1		3		TI	
· Alaska income tax from Schedule D-SF, I	ine 7		4	,	TX	
Other taxes from Schedule E-SF, line 5			5	,	OT	
Federal-based credits from Schedule F, li	6 () CR			
· Total Tax. Sum of lines 4, 5 and 6			7			
B. Incentive Credits (see instructions on pag	8 () IC			
- Alaska Education Credit from Schedule G	9 () EC			
Net Alaska income tax (line 7, net of lines	10		NT			
· Payments from page 2, Schedule C-SF		•••••	11		PT	
Tax due. If line 10 is larger than line 11, e	enter amount of ta	ax due	. 12			
3. Overpayment. If line 11 is larger than line	e 10, enter amour	nt overpaid	13			
Penalty for underpayment of estimated ta	x (Form 04-708,	line 18, see instructions) 14		UP	
5. Penalty for failure to file (see instructions	on page 5)	•••••	15		PF	
Penalty for failure to pay (see instructions	on page 5)		16		PP	
'. Interest (see instructions on page 5)			. 17		IN	
3. Total amount due (overpaid). Line 12 plus	s lines 14-17, or li	ine 13 less lines 14-17	18			
Overpayment credited to 2002 estimated					CF	
Refund (line 18 reduced by line 19)			-		RF	
I declare, under penalties of perjury, that I	have evamined t	this return including acc	omnanving of	chedules and	statements, and to the	DEPT USE ONLY
best of my knowledge and belief, it is true,		=				CFWI
information of which preparer has any kno		.p.oto. Doolaration of pr	. 5 20101 (01101	taxpayo	., 20000 011 011	
Officer's Signature		Date	Title			REFUNI
<u> </u>						
Preparer's Signature		Date	Check if \Box	Prepare	er's SSN or PTIN	APPROVE
2			self-employed	ed		
Firm's name (or		_ 1	E.I. No.			
yours if self-employed)						DATI
and address			Zip Code		-	
				Dept Use	Only	
form 04 611SE (Pavisad 11/01)		Page 1		Validation Num		

		SCH	EDULE E	B-SF-ALA	ASKA II	NCOME (LOSS	5)		
	able income, Form							. 1	
,	l							<u> </u>	
2. Additions: (a) All taxes based on or measured by net income									
							_		
		s. Add 2(a) and 2					2	С	
Subtractions	(a) Interest from	_							S
	(b) Special deduc	ctions from Form	1120, Sche	dule C					
	(c) Other (Attach	schedule)				3c			
	(d) Total subtract	tions. Add 3(a) th	rough 3(c)				3	d ()
Alaska incor	me (loss). Add line	es 1, 2(c) and 3(d). Enter he	re and on					
Schedule A,	line 1						4	1	F
	TAX RATE SO	CHEDULE (AS	43.20.01	11)			SCHEDULE C	: - SF	
If your Alaska taxa		, , , , , , , , , , , , , , , , , , ,	1012010	(5)	1		ED TAX PAYN		D
,	(2)			Of The	Estim	ated Payments	Date	Amo	
(4)		(2)				•	20.0	7	<u></u>
(1)	But Less	(3)	(4)	Amount	(1)	04-711			
At Least	Than	Your Tax Is	Plus	Over	(2)	04-711			
					(0)	04.744			
					(3)	04-711			
-0-	10,000	-0-	1%	-0-					
10,000	20,000	100	2%	10,000	(4)	04-711			
20,000	30,000	300	3%	20,000		ative Terr 04 700			F
30,000 40,000	40,000 50,000	600 1,000	4% 5%	30,000 40,000	renta	tive Tax 04-709		+	
50,000	60,000	1,500	5% 6%	50,000	Over	payment From Pric	or Vear		
60,000	70,000	2,100	7%	60,000	OVCI	bayment i form i ne	n real		
70,000	80,000	2,800	8%	70,000	Less:	Quick Refund (Fo	orm 4466)	()
80,000	90,000	3,600	9%	80,000		,	,		T
90,000	or More	4,500	9.4%	90,000	Total	Payments to Sche	edule A, Line 11	\$	
		SCHE	OULE D -	SF - ALAS	KA TA	X COMPUTATI	ON		
							Α	В	
 Alaska taxat 	ble income from S	chedule A, line 3.				1			
2. Net capital g	gain, not to exceed	l line 1. If line 1 is	a loss ente	er zero.					
(See instruc	tions)					2			
3. Ordinary inc	ome. Subtract line	e 2 from line 1. If	less than z	ero. enter zer	0	3			
=	the tax on ordinar								
the Tax Rate		y moomo, appry a	io amount	011 11110 0 10					
		Data Cabadula				4			F
	lumn 3 of the Tax								
	capital gains. Mult								
	and 5								
7. Enter the les	sser of line 6, colu	mn A or B here ar	nd on Sche	dule A, line 4.		7			
		SCHE	OULE E -	SF - OTHE	R TAXI	ES (AS 43.20.0	21)		C
						Α		В	
A Alfred C	ututus ee t	fa-dama From 1995	2		10	Α	V 400/ 4		
	ninimum tax from				та		x 18% 1	υ	
•	ior year minimum							.].	
	J, line 6e						x 18% 2		<u>)</u> F
	al taxes (attach scl						x 18% 3	b	
								l l	
5. Total other t	axes. Add lines 1	through 4, enter l	nere and or	n Schedule A,	line 5		5	5	
					Enter na	ame, address and	federal EIN of pre	evious business:	
If this is the	first return, indicat	e whether:					•		
	New Business								-
_		wioughy oxiation L	uninana						_
u	Successor to pre	viously existing b	usiness						_
Form 04 644	1SF (Rev 11/01)			ח	age 2				
1 01111 0 4 -0 1	101 (INEV 11/UI)			Р	aye z				